

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 1 OF 2
 FOR LINE 24 OF FORM 3X

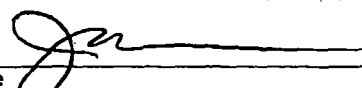
NAME OF COMMITTEE (In Full) BLUEGRASS RURAL		FEC IDENTIFICATION NUMBER C00567172
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY 10 / 27 / 2014

Full Name of Payee Wallingford Broadcasting		Date of Public Distribution/Dissemination 10 / 27 / 2014	
Mailing Address 128 Big Hill Ave		Amount 775.00	
City Richmond	State Ky	Zip Code 40475	Date of Disbursement or Obligation 10 / 22 / 2014
Purpose of Expenditure Radio Ads		Category/Type 004	
Name of Federal Candidate Mitch McConnell		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: Ky
Calendar Year-To-Date Per Election for Office Sought 12047.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee WTCO-Am Commonwealth Broadcasting		Date of Public Distribution/Dissemination 10 / 27 / 2014	
Mailing Address P.O. Box 1053		Amount 375.00	
City Campbellsville	State Ky	Zip Code 42718	Date of Disbursement or Obligation 10 / 22 / 2014
Purpose of Expenditure Radio Ads		Category/Type 004	
Name of Federal Candidate Mitch McConnell		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: Ky
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1150.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

 Signature 

 Date **10 / 28 / 2014**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 2 OF 2
 FOR LINE 24 OF FORM 3X

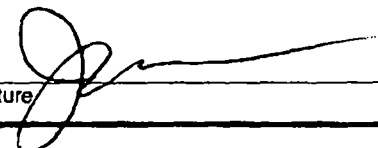
NAME OF COMMITTEE (In Full) BLUEGRASS RURAL	FEC IDENTIFICATION NUMBER 000567172
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y	

Full Name of Payee Heritage Media of Kentucky, Inc.		Date of Public Distribution/Dissemination 10' 27' 2014	
Mailing Address 2160 BRANDENBURG Rd.		Amount 75000	
City Leitchfield	State Ky	Zip Code 42754	Date of Disbursement or Obligation 10' 22' 2014
Purpose of Expenditure Radio Ads		Category/Type 004	
Name of Federal Candidate Mitch McConnell		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: Ky
Calendar Year-To-Date Per Election for Office Sought 13,172.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	75000
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	190000

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 Signature 

 Date **10' 28' 2014**

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<input type="checkbox"/> No Postmark	
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(8/2013)